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PATENT

Attorney Docket No.   TRW(AEC)6686

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of Inventor(s):   *Wilfried Schmon, Markus Altmann, and Peter Schulte*

For (title):   **MULTIFUNCTIONAL PUSHBUTTON SWITCH**

Enclosed are:

1.   Papers Required for Filing Date Under 37 CFR 1.53(b):

    4   Pages of specification

    1   Pages Abstract

    2   Pages of claims

    3   Sheets of drawing

        ☒   formal (Figs.   -   )

        ☐   informal

In addition to the above papers there is also attached:

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date **August 5, 2003**   in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number **ET924151146**   addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Deborah Denn
(Type or print name of person mailing paper)

[signature]
(Signature of person mailing paper)

6. **Fee Calculation:**
   (Small entity filing fee is 50% normal fee)

CLAIMS AS FILED					
Number Filed			Number Extra	Rate	Basic Fee
					$ 750.00
Total Claims	8	-20 =		X $ 18.00	-0-
Independent Claims	1	- 3 =		X $ 84.00	-0-
Multiple dependent claim(s), if any				+ $280.00	

☐ Amendment canceling extra claims enclosed

☐ Amendment deleting multiple dependencies enclosed

☐ Fee for extra claims is not being paid at this time

Filing Fee Calculation   **$750.00**

7. **Small Entity Statement**

☐ The present application is being filed by or on behalf of a **small entity** as defined in 37 CFR 1.9 and 1.27 for purposes of paying reduced fees.

8. **Fee Payment Being Made At This Time:**

Enclosed:

☒ basic filing fee   **$750.00**

☐ assignment recordal fee $_____

☐ for processing an application with a specification in a non-English language $_____

Total fees enclosed   **$750.00**

9. **Method of Payment Fees:**

☒ check in the amount of **$750.00** _____enclosed.

☒ The Commissioner is hereby authorized to charge any **DEFICIENCY** in the filing fees for this application to our Deposit Account No. 20-0090.

10. **Instructions As to Overpayment:**

☒ refund

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SIGNATURE OF ATTORNEY, REG. NO.20,177

THOMAS L. TAROLLI
Type or print name of attorney

EXPRESS MAIL NO. ET924151146

2.   **Declaration or oath:**

☐   Enclosed (Executed)

☒   Not Enclosed.

3.   **Language:**

☒   English

☐   Non-English

☐   A verified English translation of the

☐   specification and claims

☐   declaration

is attached.

4.   **Assignment:**

☒   An assignment of the invention to   TRW Automotive Electronics & Components GmbH & Co. KG

☐   is attached.

☒   will follow

5.   **Certified Copy:**

Certified copy (ies) of application (s)

GERMANY	202 12 254.9	8-Aug-02
(Country)	(Appln. No.)	(Filed)
(Country)	(Appln. No.)	(Filed)
(Country)	(Appln. No.)	(Filed)

from which priority is claimed

☒   is attached

☐   will follow